

Claims Process

<https://www.semcohvac.com/claim-form>

- 1

Locate the system label located on the unit (FIGURE 1).
- 2

Go online to find the claim form at <https://www.semcohvac.com/claim-form>
- 3

Fill out the online claim form and click submit (FIGURE 2).

The information needed to fill out the form can be found on the unit label (FIGURE 1). Click “Submit” when completed.

- 4

You will receive an email confirmation of your claim request.

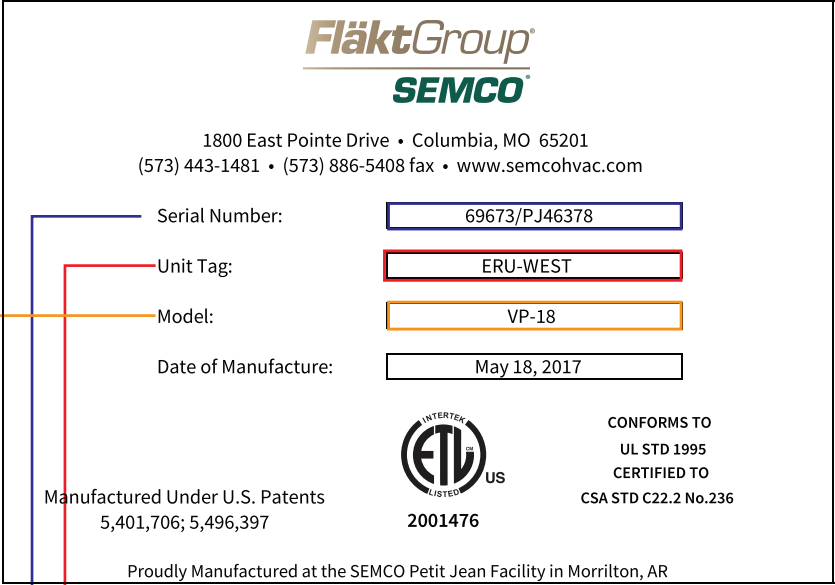


FIGURE 1: Unit Label

1

2

3

Claim Details

Product/Equipment Location

Ship to Address

Project Contact Email *

Date Issue Was Found *

Email

Date Issue Was Found

Model Number *

Unit Serial Number *

Model Number

Unit Serial Number

Product Category *

Failure Category *

Please select

Please select

Next

1

2

3

Product/Equipment Location

Ship to Address

Project Contact First Name *

Project Contact Last Name *

Project Contact First Name

Project Contact Last Name

Project Name *

Street Address *

Project Name

Street Address

State/Region *

Postal Code *

Please select

Postal Code

Country/Region *

Country/Region

Previous

Next

1

2

3

Ship to Address

Shipping Name *

Shipping Name

Shipping Address *

Shipping Address

Shipping City *

Shipping City

Postal Code *

Postal Code

Shipping Country/Region *

Shipping Country/Region

Shipping Phone Number *

Shipping Phone Number

Failure Description

Please provide a detailed description of the failure

FIGURE 2: Online Claim Form